

Inspection report

East Kilbride & District Dementia Carers Group Support Service

169 Pine Crescent
Greenhills
East Kilbride G75 9HJ

Inspected by: Gillian McPake
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 19 March 2007

Service Number

CS2003001410

Service name

East Kilbride & District Dementia Carers Group

Service address169 Pine Crescent
Greenhills
East Kilbride G75 9HJ**Provider Number**

SP2003000281

Provider Name

East Kilbride & District Dementia Carers Group

Inspected ByGillian McPake
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

19 March 2007

Period since last inspection

15 Months

Local Office AddressPrince Gate
60 Castle Street
Hamilton
ML3 6BU

Introduction

East Kilbride and District Dementia Carers Group is registered to accommodate six people with diagnosed dementia.

The building is situated in a quiet residential area of East Kilbride and blends well with the surrounding environment.

The service as stated by them aim "to have a warm, friendly stable environment. To treat service users with respect, encouraging and assisting service users throughout the day in self help, domestic and social skills".

Basis of Report

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine what level of support was necessary. The RSA is an assessment undertaken by the Care Commission Officer which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service and action taken upon past requirements.

This service was assessed to have a low level of support that resulted in an inspection based on the national inspection themes and follow up of any recommendations and requirements from the previous inspection.

This report was written following an announced inspection carried out by, Gillian McPake Care Commission Officer.

During the visit which took place on the 19 March 2007, from 9.30am to 2.30pm the Care Commission Officer spoke with

- . The Manager
- . 4 staff members
- . 1 Kitchen staff member
- . 6 Service Users

The Care Commission Officer also looked at a range of policies, procedures and records including the following:

- . Personal plans
- . The policy and procedures manual
- . Staff rotas
- . Staff recruitment files
- . Training Records

and spent time observing how staff interacted and worked with service users.

The Care Commission Officer took all of the above into account and reported on whether the service was meeting the following National Care Standards, for Support Services, selected care triggers and the action taken following the previous announced inspection in November 2005.

Standard 2 – Management and Staffing Arrangements
Inspection Theme – Safe Recruitment
Standard 5 - Your Environment

Standard 9 - Supporting Communication
Standard 12- Expressing Your Views
Standard 15 - Eating Well
Inspection Theme – Nutrition

Action taken on requirements in last Inspection Report

No requirements were made from the previous inspection.

Comments on Self-Evaluation

A self evaluation and annual return was sent prior to the inspection of this service. This provided up to date information about the service and provided areas for development and improvement which can be seen in the body of this report.

View of Service Users

Six of the 6 services users attending the service on the day of inspection were all consulted about the service. All clearly enjoyed being in the service. All their comments were very positive about the staff and the facilities available to them. Further views can be seen in the body of this report.

View of Carers

There were no carers available to consult with on the day of inspection.

Regulations / Principles

Regulation :

Strengths

Areas for Development

National Care Standards

National Care Standard Number 2: Support Services - Management and Staffing Arrangements

Strengths

This standard was previously inspected and reported upon at the last inspection the service continue to meet this standard.

A suitable recruitment policy and procedure was in place including Disclosure Scotland information; which the Manager advised was to be updated and reviewed in line with new guidance now available.

All staff were recruited and suitable checks were undertaken prior to commencing employment. A register was available of staff's enhanced disclosure numbers as well as any updates of these.

Areas for Development

The recruitment policy was to be amended to include a requirement to check professional registers, this the Manger advised was to be completed when the review and update of this policy was being carried out.

Although written references were obtained these were not always suitable. (see recommendation 1)

The service have identified in their self evaluation and advised 'the group is working towards having all care workers with relevant qualifications. In house training on 'restraint' to all who work in the service' and ' that external training is being sourced to supplement this'.

National Care Standard Number 5: Support Services - Your Environment

Strengths

The service set in a residential area , blends well into its surroundings. There is a well maintained enclosed garden to the rear of the property which service users have full access

to.

The building is designed to promote and maintain the independence of the service users.

A smoking policy is in place and refers to the new Smoking legislation.

A copy of the environmental health report provided evidence that 'the kitchen operated in highly satisfactory conditions'.

Service users can request and have access to storage facilities.

The service provided a good range of equipment and activities, which service users were given the choice of. Staff were very helpful and brought a lot of new and interesting ideas for crafts and activities into the service. Service users expressed how much they enjoyed this.

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw.

Areas for Development

The service have identified in their self evaluation and recognised as an area for improvement to improve the floor space for service users and were 'actively looking for either additional ground and/or floor space'.

National Care Standard Number 9: Support Services - Supporting Communication

Strengths

Service user's personal plans identified their communication needs, as well as a regular review of these needs. Staff provided time, support and assistance in supporting their communication needs as well as any specialised equipment used.

The service provided information about interpreters, at the time of inspection none of the service users required a trained interpreter.

Areas for Development

The service have identified in their self evaluation to further identify the benefit of installing a 'loop system' for hearing difficulties and were seeking advice on this.

National Care Standard Number 12: Support Services - Expressing Your Views

Strengths

Service user's were free to discuss any concerns they may have had and suitable quiet areas were available in which to discuss anything in confidentiality.

Service users and/or their representatives were aware of how to make a complaint and suitable information was available of how to make a complaint to the service and to the Care Commission.

A copy of the Care Commission inspection report was available to look at in the service and information in the pack provided to service users detailed how a copy of this would be provided upon request.

Minutes of service user and representative meetings/forums were available and provided good evidence of information provided to service users and their representatives as well as comments and views from the user's of this service.

Areas for Development

The service in their self evaluation, have recognised to have the service user's forums on different days of the week.

National Care Standard Number 15: Support Services - Eating Well where the support service provides meals

Strengths

Service user's dietary preference, likes, dislikes and choices were well documented in their personal plan as well as any special dietary needs and or assistance required. This also included any adapted cutlery or crockery.

The daily menu contained fruit and vegetables and was further supplemented with fruit and fluids provided and offered by staff throughout the day.

The fruit was provided in a suitable form for example chopped or liquidised if preferred.

The Care Commission Officer sat with service users for lunch, this was an enjoyable, relaxed experience, the food was presented well and kitchen and care staff did not rush the meals and knew exactly what each service user enjoyed and preferred.

Service users expressed how much they enjoyed their meals in the service and expressed the availability of choice of meals and snacks.

The kitchen staff were very well organised and used fresh ingredients from local suppliers. A list of likes and dislikes were available as well as special diets. Kitchen staff would consult regularly with the service users of their preferred meals, account was taken of this and menu's adapted accordingly.

A list of what service users had eaten or had not was kept as a record in the kitchen and this information was transferred to individual's personal plans.

Although service users are not formally screened for malnutrition and dehydration staff are quick to identify if they have any concerns about a service user's fluid and diet intake and will

notify family and/or the relevant health professional.

Areas for Development

The service do not have a policy and procedure on food,fluid and nutrition. (see recommendation 2)

The service menu's are not currently assessed by a qualified dietician. (see recommendation 3)

The service currently do not screen service users for risk of under nutrition and or dehydration. No formal tool is used to screen service users for this. (see requirement 1 /recommendation 4)

Enforcement

No enforcement action has been taken on this service since the last inspection

Other Information

None

Requirements

1. The provider must undertake a review of nutritional risk screening procedures to ensure that service users at risk of malnutrition are identified and appropriate care plans developed and monitored.

This is in order to comply with:

SSI 2002/114 Regulation 4(1)(a) - A requirement to make proper provision for the health and welfare of service users.

Timescale for implementation: 6 weeks from publication of this report

Recommendations

1. Suitable written references should be obtained, one of which should be from a suitable person i.e. Manager; from the employees previous place of employment.

National Care Standards, Support Services, Standard 2: Management and Staffing (Safe Recruitment theme)

2. The service should develop a policy and procedure for food 'fluid and nutrition, to ensure that the service food, fluid and nutritional care are supported by clear management guidelines.

National Care Standards Support Services, Standard 15: Eating Well (Nutrition theme)

3. The service should have their menu's assessed by a qualified Dietician.

National Care Standards Support Services, Standard 15: Eating Well (Nutrition theme)

4. The service should screen service users using for under nutrition using a suitable an recognised tool for assessment within one month of admission and regularly thereafter. This should include their Body Mass Index.

National Care Standards Support Services, Standard 15: Eating Well (Nutrition theme)

Gillian McPake

Care Commission Officer